PTO/SB/17 (01-06)
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Under the Paperwork Reduction	espond to a collection of information unless it displays a valid OMB control number.								
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known					
FEE TRANSMITTAL				, , , , , , , , , , , , , , , , , , , ,		09/769,293-Conf. #004828			
				Filing Date	17 17 1710				
For FY 2006				1 11 01 1 101 1100 1117 011101		Yoshiharu HINO	<i>.</i>		
						S. H. Lee			
Applicant claims small entity status. See 37 CFR 1.27				Aut Offic		876			
TOTAL AMOUNT OF PAYMENT (\$) 790.00				Attorney Docket No. 01		0152-0549P	152-0549P		
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
X Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
	FILIN	G FEES	SE	ARCH FEES	EXAMIN	NATION FEES			
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees 1	Paid (\$)	
Utility	300	150	500	250	200	100			
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM FEES	200	100	Ü	V	V	J		Small Entity	
								Fee (\$)	
Each claim over 20 (including Reissues)							50	25	
Each independent claim over 3 (including Reissues)							200	100	
Multiple dependent claims							360	180	
				Paid (\$)	<u>M</u>	ultiple Depende	nt Claims		
7 -20 = x = =						<u>ee (\$)</u> <u>F</u>	ee Paid (<u>\$)</u>	
HP = highest number of total clair	ns paid for, if g	greater than 20.							
				Paid (\$)					
1 -3=	× _	= -	- 0						
HP = highest number of independ	•	a tor, if greater tha	n 3.					_	
3. APPLICATION SIZE FEE If the proping extra and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
<u>Total Sheets</u> <u>Ex</u>	tra Sheets			additional 50 or frag			<u>Fee</u>	Paid (\$)	
- 100 = /50 (round up to a whole number) x =									
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 790.00								90.00	
SUBMITTED BY	/	2							
Signature Registration No. (Attorney/Agent) 32,881 Telephone (703) 205-800								05-8000	
Name (Print/Type) John W. Bailey						Date	Date August 23, 2006		